Report of Property Transfer Use prescribed by NIH Manual 26101-25-2.

Please print or type. Complete all items. Send the first 4 copies to Personal Property Branch, Bldg. 13, Room 2E65. Keep the last copy for your files.

Use this form to: (1) Transfer property between custodial areas, (2) Transfer property to and from Property Utilization Section (Custodial Area 09340), (3) Report fabrication of new property.

Transferre	Transferred To						
Contact's Name	ICD		Contact's Name		100 10	ICD	
Phone No. Building/Room			Phone No.	Phone No.		Building/Room	
CAN Custodial Code			CAN		Custodial Code		
Name of last user of property			Comments				
Form NIH 2683, "Certification that Property is Free from Hazards," has been completed and attached to each property item. All property items listed are EXEMPT from hazardous clearance procedures since they were not used in laboratory or clinical areas. Approval (Signature of Lab or Branch Chief) Date			Amazal (Circut	we of lab or Drevals C	No. in El	Date	
Approval (Signature of Lab of Branch Chief)		Jale Approval (St		ature of Lab or Branch Chief)		Date	
Signature of Property Custodial Officer Da		Pate Signatu		re of Property Custodial Officer		Date	
CD Property Representative Date			ICD Property Representative			Date	
DECAL NO. DESCRIPTION				SERIAL NO.		ONDITION see codes) on back)	CLR
Requested Pick-up Date (for large shipments)			Processed by Transportation (employee's name)			Da	te
				Processed by Property Utilization Section, PPB (employee's name) Deerty Accountability Section (PAS) Pink - ICD Property Repense copy for PAS Gold - Originator			te sentative

"Condition" Codes

- 1 Unused -- Good
- 2 Unused -- Fair
- 3 Unused -- Poor
- 4 Used -- Good
- 5 Used Fair
- 6 Used -- Poor
- 7 Repairs Required (15% of acquisition cost or less)
- 8 Repairs Required (16% to 40% of acquisition cost or less)
- 9 Repairs Required (41% to 65% of acquisition cost or less)
- **X** Salvage
- **S** Scrap